OFGS FILE NO. P/4674-3

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that I verily believe that I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INTERNAL COMBUSTION ENGINE COMPRISING A CONNECTING MEANS FOR CONNECTING A FIRST SECTION OF A WIRE HARNESS ON A CYLINDER HEAD HOUSING TO A SECOND SECTION OF THE SAME

CYLINDER the specification of which is attached			ECOND SECT	ON O	F THE	SAME	
was filed on August 6, 2		=		tional nate	ant		
application number PCT/E					-III		
application number PC1/E	F2003/000014	and was amended	on	(11 any).			
I hereby state that I have reviewed amendment referred to above. I acknowledge the duty to disclose							
§1.56. I hereby claim priority benefits une provisional application(s) listed below that of the application on which priori	v and have also identifie ity is claimed:						
Prior Foreign or Provisional Applicati COUNTRY	APPLICATIO	N NUMBER	DATE OF	FILING PRIORITY CLAIMEI			<u>_</u>
COONTRI	AITERATIO	NOWIDER	(day, mon			UNDER 35 U.S.C. 11	
PCT	PCT/EP2003/	008674	06, August, 20	, August, 2003 YES X NO August 2002 YES X NO		YES X NO	
Germany	102 36 505.9		09, August, 2002			YES X NO	_
<u> </u>						YES NO	_
each of the claims of this application in United States Code, §112, I acknowle Regulations, §1.56 which became ava application. UNITED STATES	dge the duty to disclose	information which	is material to patentabili oplication and the nation	ty as defin	ned in Title internationa	37, Code of Federal	
APPLICATION NUMBER		(day, month, year)		(patented, pending, abandoned)			
I hereby appoint customer no. 2352 C power of substitution and revocation t receive all correspondence.	DSTROLENK, FABER, to prosecute this applicate	GERB & SOFFEN tion, to transact all l	, LLP, and Klaus P. Storbusiness in the Patent &	ffel, Regis Trademar	tration No. 1 k Office con	31,668, as attorney with finected therewith and to	ull
1	O CORRESPONDENCE TO: Klaus P. Stoffel OSTROLENK, FABER, GERB & SOFFEN, LLP 1180 AVENUE OF THE AMERICAS NEW YORK, NEW YORK 10036-8403 CUSTOMER NO. 2352 Klaus P. Stoffel (212) 382-0700 (212) 382-0700						
I hereby declare that all statements ma true; and further that these statements imprisonment, or both, under Section application or any patent issued therec	were made with the know 1001 of Title 18 of the U	owledge that willful United States Code,	false statements and the and that such willful fal	like so m	ade are puni ents may jeo	shable by fine or	
FULL NAME OF SOLE OR FIRST INVENTO	ATURE		DATE				
Oscar Blasco Barrena				COLINITE	V OF CITIZE	NCIUD	
RESIDENCE (City and either State or Foreign Country) Friedrichshafen, Germany					Spain		
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Kleinebergstraße 9, 8804		en, Germany					
FULL NAME OF SECOND JOINT INVENTO	OR (if any)	INVENTOR'S SIGN	ATURE		DATE		
Walter Hanning							
RESIDENCE (City and either State or For	reign Country)			COUNTR	Y OF CITIZE	NSHIP	
Detmold Germany				тепп	aliv		

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Am Langen Grund 66, 32758 Detmold, Germany

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UNITEI	OFGS FILE NO.				
COMBINED DECLAR	P/4674-3				
FOR P	ATENT APPLICATION				
COUNTRY	APPLICATION NUMBER	DATE OF FILT (day, month, ye	· =		
				YES NO	
				YES NO	
			-1-	YES NO	
				YES NO	
			·	YES NO	
		- X		YES NO	
		- "		YES NO	
				YES NO	
			- " -	YES NO	
				YES NO	
the application or any patent issued the	1001 of Title 18 of the United States nereon.	Code and that such willful fal	se statements r	nay jeopardize the validity of	
FULL NAME OF THIRD JOINT INVENTOR Dietmar Lutze	INVENTOR'S SIGNATURE	NVENTOR'S SIGNATURE DATE			
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FULL NAME OF FOURTH JOINT INVENT	INVENTOR'S SIGNATURE		DATE		
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FULL NAME OF FIFTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	ENTOR'S SIGNATURE DATE		
	<u> </u>	COUNTRY OF CITIZENSHIP			
RESIDENCE (City and either State or Fo	oreign Country)		COUNTRIC	or errazaronia	
POST OFFICE ADDRESS					
FULL NAME OF SIXTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	DATE		
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